



Commissioner for Patents
Washington, DC 20231
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Bib Data Sheet

CONFIRMATION NO. 2082

SERIAL NUMBER 09/198,087	FILING DATE 11/23/1998 RULE	CLASS 606	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. QUIC-1	
APPLICANTS STEPHEN COLVIN, NEW YORK, NY; EUGENE GROSSI, NEW YORK, NY; ALLAN KATZ, FREEPORT, NY;					
** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/28/1998					
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY NY	SHEETS DRAWING 6	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 4
ADDRESS Todd S. Sharinn Greenburg Traurig LLP 885 Third Avenue 21st Floor New York ,NY 10022					
TITLE PASSIVE KNOTLESS SUTURE TERMINATOR FOR USE IN MINAMALLY INVASIVE SURGERY AND TO FACILITATE STANDARD TISSUE SECURING					
FILING FEE RECEIVED 1090	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			

SERIAL NUMBER 09/198,087	FILING DATE 11/23/98	CLASS 606	GROUP ART UNIT 3732	ATTORNEY DOCKET NO. QUIC-1
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APPLICANT
STEPHEN COLVIN, NEW YORK, NY; EUGENE GROSSI, NEW YORK, NY; ALAN KATZ,
FREEPORT, NY. Paul oddo, Freeport, N.Y.

CONTINUING DOMESTIC DATA***

VERIFIED

M J. none

371 (NAT'L STAGE) DATA***

VERIFIED

M J. none

FOREIGN APPLICATIONS***

VERIFIED

M J. none

FOREIGN FILING LICENSE GRANTED 12/28/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NY	SHEETS DRAWING 6	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 4
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ADDRESS Verified and Acknowledged Examiner's Initials	TODD S SHARINN PEPE & HAZARD 225 ASYLUM ST HARTFORD CT 06103
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TITLE PASSIVE KNOTLESS SUTURE TERMINATOR FOR USE IN MINIMALLY INVASIVE SURGERY AND TO FACILITATE STANDARD TISSUE SECURING
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FILING FEE RECEIVED \$1,090	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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